

**Subject:** FParentChild+ Virtual Visit Guidelines

**Sent:** Thursday, April 2, 2020 3:15 PM



Dear    Amazing    ParentChild+    Staff,

We write to you today with deep gratitude as you continue to share your stories with us. You are all supporting your communities in a variety of powerful and creative ways during these unprecedented times. You are reporting on families losing jobs, in need of food and household supplies, and facing social isolation at an extreme level, needing support now more than ever. And you are reporting on families hungry for contact and sharing videos and pictures of their reading and playing with their children. These stories are both heart-wrenching and encouraging, demonstrating that ParentChild+ staff are a vital source of support for so many of the families and demonstrating your commitment to helping in every possible way.

In this national crisis, everyone is experiencing stress, loss, and fear and you are on the front lines daily, and are both living it and supporting others through it. First and most importantly, please take care of yourselves. Please make sure to rest, breath, find what works for you. Below is a first round of guidance ([You can also download it here](#)), developed in conjunction with your reports from the field, for conducting virtual visits. We will be continuing to develop and amplify on this guidance as we get your feedback on what you are experiencing. Stay tuned for an announcement about our plan to implement a feedback loop.

Though ParentChild+ is a face-to-face, in person program, it is most importantly a program designed to support families by fostering loving and trusting relationships, and to work with parents in supporting the healthy development of their children. Right now, we are all experiencing the urgent need to sustain that support and provide continuity for families through this crisis. This means that during this crisis, we need to make use of diverse technological means to keep connecting with as many families as possible, in whatever way possible. All sites should, of course, follow the CDC's guidelines, state and

local mandates, and your local agency protocol on all safety precautions and activities. Also, please know that during this crisis what matters is taking care of yourself physically and psychologically and supporting the families in whatever capacity is appropriate; traditional program metrics, outcomes, and regular procedures will not be possible and are not a priority right now. We will work with you on documenting and telling the story of the critical work you are doing.

With that in mind, we are providing some guidelines for conducting virtual visits. Part I of this document provides a checklist for preparing for virtual visits, and Part II has suggestions for visit structure and content. For each section, we have also developed an infographic that summarizes the guidance.

## **PART I Prepare for virtual visits** ([link to infographic](#))

### **1. Tech Set-up**

- Assess whether staff have the equipment (phones, tablets, laptops, etc.) and tech support needed to conduct virtual visits
- Assess whether families have the technology for virtual visits, including internet access or an adequate data plan. Virtual visits can be conducted using apps such as WhatsApp, Facetime, Zoom, or Google Hangouts, to name a few.
- Visits can take place on a smart phone, tablet, or computer.
- We can work with you to advocate for and seek funding to obtain technology for staff and families for equipment/internet access in order to support virtual visits, staff meetings, etc.. A number of the foundation and community emergency funds that have been set up across the country are supporting tech needs. Please complete the survey previously distributed to let the national center know whether staff and families need assistance in this area.
- When doing virtual visits, figure out in advance where to sit so that the family can see and hear you (make sure there is not a light source behind you, as your face will be in the dark). Prepare to provide some tech support for the families too.
- Please note for those organizations covered by HIPPA, or who follow HIPPA guidelines on data privacy & security, HHS has eased HIPPA requirements on ways to conduct virtual visits. For more information see HHS info [please click here](#). Please consult with your agency for any additional guidance.

### **2. Discussing Virtual Visits with Families**

- Please discuss with families whether they would like to do virtual visits, and always offer the option of telephone check-ins instead. Even if families have the

technology set-up, they may not be able or willing to participate in virtual visits as they deal with the impacts of the crisis.

- If families are not ready for virtual visits, please continue to maintain contact with the families and keep them feeling connected and supported via texts, emails, or phone calls. A family may decide at a later date to begin virtual visits.

### **3. Practice Protocols**

- Follow all guidelines provided by state and local authorities to deal with COVID-19, i.e. around dropping off, mailing, or setting up drive-throughs for food, supplies, and/or program materials.
- Prepare and gather the most up-to-date local resources to provide families information and referrals (e.g. local procedures for COVID-19 testing and treatments, food pantries, mental health services, unemployment benefits, etc.).
- During a virtual visit, acknowledge the unusual and uncertain circumstances and allow the family to do the same, being present for families, and actively listening to families, is the priority. Make sure you look directly at the camera in front of you and are not multitasking (e.g. reading email or looking at other windows), and are reflecting back what you are hearing from families.
- As the families' needs may change day to day, it is important to keep checking-in at each visit as to how they are doing and what their immediate needs are. This conversation may take the entire visit. It is okay if you do not get to any play or reading activities during a visit. But also note that some families may want that respite of reading and playing with you and their child(ren) and may want to talk about other needs at the end of the visit or by text.
- When appropriate, please use these guidelines to create protocols and practice standards that are specific to your site. Make sure they align with the needs of the families and staff in your local community.
- Virtual visits should be family-led, flexible, and creative, supporting the parent-child relationship, but taking into account the context and immediate needs of individual families. Make sure to acknowledge and address the impact of the crisis on the parents and other adults in the household, as well as the children.
- Create boundaries. Due to the 24/7 contact possible through technology, Coordinators should make sure that the Early Learning Specialists know that they do not have to be constantly responding to families, and that it is important to block time for themselves and their own families' needs.

### **4. Supervision & Network support**

- Coordinators and Early Learning Specialists should take care of themselves first.
- Coordinators should check in with staff and provide the extra support and supervision they will need through all these transitions. Remember program staff may be experiencing many of the same challenges as program families, and none of us can do our work well if we are not receiving support and opportunities to share that we need.
- The national center, along with state directors, will be providing opportunities for sites to share experiences, challenges and successes with each other. As we are all new to virtual visits and to dealing with the impact of COVID-19, we need to engage in communities of practice, and, share, learn, and get support from each other.
- Also, please know that during this crisis what really matters is taking care of yourself physically and psychologically and supporting the families in whatever capacity is appropriate; traditional program metrics, outcomes, and regular procedures are not possible and are not a priority.

## **PART II Content of the Visit** [\(link to infographic\)](#)

Given the continually changing circumstances we are currently living in, families' needs will likely change daily. In response, our support for families will extend beyond the typical home visit. The focus of the visit may shift to the immediate needs of the family as they deal with the impact of outbreak. **It is okay if you don't get to a parent-child activity on every, or many, visits. We need to be sure we are supporting parents so they can help their children deal with the impact of what is happening.** In this context, ParentChild+ wants to continue to reinforce a few messages/themes for these virtual visits:

- First and most importantly, please take care of yourselves. Please make sure to rest, breath, find what works for you.
- Be consistent and be there: ParentChild+ encourages you to call or virtually visit with families 2x/week as you would otherwise. The consistency may be one of the few things that is the same for families under these stressful circumstances.
- Put families' own needs first: Virtual visits are not going to look the same across agencies or even family to family. It is a time to be flexible and consider the needs of the families first.
- Be Flexible: Work with your stakeholders (funder/agency) when considering what needs to change in terms of service delivery. We are here to support you in any conversations with your funders and agency to determine what, if anything, needs to change in terms of funding uses, reporting, and outcomes.

- Prioritize self-care: Please try to take care of yourselves and your personal mental and physical health as much as possible. Perhaps staff need extra reflective supervision or even website links to personal wellness resources, including workout or meditation regimes. Let's all try to take care of ourselves and each other.

We have updated the Family Check-in Form to meet the needs of our program sites as the situation has evolved, [please click here](#).

Virtual visits might contain the following questions/discussions, depending on your local context:

**Does the family have concerns about anyone in the family developing symptoms of or being at risk of exposure to COVID-19? If so, please explore and listen to the family's concerns.**

- Might need to connect family to Covid-19 testing resources in your community. These resources are expanding on a daily and weekly basis, so we recommend that ELSs be equipped with the most up-to-date information.

**Are there other concerns or issues the family wants to talk about?**

- Many agencies are working with families who are experiencing unemployment, threats of eviction, limited access to health care, and/or food shortages, including immigrant families who have been hit particularly hard. During these extremely vulnerable times, please ensure that you are equipped with the most up-to-date information on local food pantries, school lunch pickup sites, diaper drives, etc. and are documenting families' needs as these basic needs are the types of things emergency funding sources in communities may be available to support.

**How is the child? Are there any changes to the child's routine? Have you developed any new routines?**

- The family might want to talk about their general concerns, including their own mental health and wellness. Although we are not clinicians, there are some important listening skills we can always reinforce. It is especially important to consider taking a step back and listening when families are using emotionally loaded words (like "frustrated," "sad," "lonely," "anxious," "stressed"):
  - Pause and actively listen. Wait until they are done speaking.

- Mirror what they are saying in tone and emotion: “I understand you feel stressed.”
- Summarize what you heard: “So you are saying you feel upset because XYZ is happening in your life right now.”
- Validate or clarify: “It makes sense that you feel this way” OR “Help me understand XYZ”
- Emphasize: “I can imagine it’s difficult to deal with XYZ.”

Again, if you are unable to get to an activity or VISM because a family is dealing with a crisis or difficult emotions, that is okay. We are a relationship-based program. It is more important, because you have a close relationship with the family, that you provide support and a secure base for the families particularly during this difficult time.

Some sites have been able to drop off or mail VISM and other materials to families, but that is not necessary in order to have successful virtual visits. Here are a few tips for supporting reading, playing, and having some fun without the use of VISM:

- Ask about the child’s favorite toys, books, or activities, engage with one of those with the family.
- Play word games, such as rhyming games, grouping games (name animals that fly, name animals that swim, etc. or name things that are your favorite color, etc.), or take turns naming shapes, numbers, animals, furniture, clothes, etc.
- Use oral storytelling. Start a story, have the parent add to the story, then have the child add to the story. Continue as long as the child stays engaged.
- Have fun with singing, finger plays, and nursery rhymes.
- Take turns making funny faces.
- Ask the child to find something yellow in the room, then something red in the room, etc.
- Be creative – use your own ideas! You know what your families will enjoy.

Thank you for continuing to be a vital source of support to your communities.

In Solidarity,  
 The ParentChild+ National Center Team



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